



**Town of Monterey
911 Number Application**

**PLEASE COMPLETE THIS FORM IN ITS ENTIRETY TO OBTAIN A 911 NUMBER. ALL
INFORMATION MUST BE PRINTED CLEARLY.**

Applicant's name (must be owner of property): _____

Mailing Address: _____

Telephone: _____ Fax: _____

Name of Road where property is located: _____

Name of closest intersecting road: _____

Distance in feet from closest intersecting road to proposed or existing driveway, as shown on Driveway Permit: _____

From closest intersection, which side of the road is your property: Left or Right (circle one)

Assessor's Map #: _____ Lot #: _____

Is there a site plan attached indicating where driveway will be located? Yes or No (circle one)

Is there a copy of the assessor's map indicating location of building lot? Yes or No (circle one)

Is a copy of the Driveway Permit attached? Yes or No (circle one)

Is this a Public or Private Road? Public or Private (circle one)

Signature of Applicant

Date

911 Number _____ on _____ Road.

911 Coordinator Maynard Forbes

Return completed form to Maynard Forbes

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Revised 8.23.05